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Bib Data Sheet

CONFIRMATION NO. 2608

|   |   |                               |   |   |                                |
|---|---|-------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/976,516  | <b>FILING DATE</b><br>10/12/2001<br><b>RULE</b>   | <b>CLASS</b><br>370           | <b>GROUP ART UNIT</b><br>2661   | <b>ATTORNEY DOCKET NO.</b><br>PF02025NA/10-29 |                                |
| <b>APPLICANTS</b><br>Vijaykumar M. Patel, Fairfax, VA;<br>Jheroen P. Dorenbosch, Paradise, TX;  |   |                               |   |   |                                |
| <b>** CONTINUING DATA *****</b>   |   |                               |   |   |                                |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                               |   |   |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 11/12/2001</b>  |   |                               |   |   |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance |   | <b>STATE OR COUNTRY</b><br>VA | <b>SHEETS DRAWING</b><br>1  | <b>TOTAL CLAIMS</b><br>20                     | <b>INDEPENDENT CLAIMS</b><br>2 |
| Verified and Acknowledged<br>Examiner's Signature: [Signature] Initials: [Initials]   |   |                               |   |   |                                |
| <b>ADDRESS</b><br>Law Office of David G. Posz<br>Suite 200<br>2000 L Street N.W.<br>Washington, DC 20036  |   |                               |   |   |                                |
| <b>TITLE</b><br>Method and apparatus for providing node security in a router of a packet network  |   |                               |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>870   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |